DLN: 93493316013239 OMB No 1545-0047 Return of Organization Exempt From Income Tax 2018 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Treasury Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018 C Name of organization AMERICAN GAS ASSOCIATION D Employer identification number B Check if applicable ☐ Address change 13-0431590 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated Number and street (or P O box if mail is not delivered to street address) Room/suite 400 NORTH CAPITOL STREET NW NO 450 E Telephone number ☐ Amended return ☐ Application pending (202) 824-7255 City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC  $\,$  20001 G Gross receipts \$ 63,454,000 Name and address of principal officer H(a) Is this a group return for KAREN HARBERT ☐Yes **☑**No subordinates? 400 NORTH CAPITOL STREET NW NO 450 H(b) Are all subordinates WASHINGTON, DC 20001 ☐ Yes ☐No included? Tax-exempt status 501(c)(3) **✓** 501(c) (6) **◄** (insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW AGA ORG L Year of formation 1971 M State of legal domicile DE K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities APPROVED BY THE AGA BOARD ON OCTOBER 13, 2015 THE AMERICAN GAS ASSOCIATION (AGA) REPRESENTS COMPANIES DELIVERING NATURAL GAS SAFELY, RELIABLY, AND IN AN ENVIRONMENTALLY RESPONSIBLE WAY TO HELP IMPROVE THE QUALITY OF LIFE FOR THEIR CUSTOMERS EVERY DAY AGA'S MISSION IS TO PROVIDE CLEAR VALUE TO ITS MEMBERSHIP AND SERVE AS THE INDISPENSABLE, LEADING VOICE AND FACILITATOR ON ITS BEHALF IN PROMOTING THE SAFE, RELIABLE, AND EFFICIENT DELIVERY OF NATURAL GAS TO Activities & Governance HOMES AND BUSINESSES ACROSS THE NATION Check this box ▶ 🔲 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 3 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 98 6 6.297 Total number of volunteers (estimate if necessary) . . Total unrelated business revenue from Part VIII, column (C), line 12 7a 869,090 7b 488,381 Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . Program service revenue (Part VIII, line 2g) . 59,356,819 34,097,266 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 367,397 898,958 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,110,016 1,554,039 35,574,679 61,809,816 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . 742,262 649,400 **14** Benefits paid to or for members (Part IX, column (A), line 4) . . . 0 19,760,594 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 19,626,208 Expenses **16a** Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 19,577,888 35,689,638 39,946,358 56,099,632 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 . -4,371,679 5,710,184 d Balances Beginning of Current Year End of Year 49,811,640 44,327,811 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 37,000,260 26,289,867 22 Net assets or fund balances Subtract line 21 from line 20 12,811,380 18,037,944 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2019-11-12 Date Signature of officer Sign Here KEVIN M HARDARDT CHIEF FINANCIAL/ADMIN OFFICER Type or print name and title Date Print/Type preparer's name Preparer's signature PTIN Check  $\square$  if P00290720 Paid self-employed ► TATE AND TRYON Firm's name Firm's EIN > 52-1855942 Preparer **Use Only** Firm's address ▶ 2021 L STREET NW SUITE 400 Phone no (202) 293-2200 WASHINGTON, DC 20036 May the IRS discuss this return with the preparer shown above? (see instructions) ✓ Yes □ No For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2018) Cat No 11282Y

Form	990 (2018)				Page 2
Pa	rt III Statement	of Program Service Acc	complishments		
			note to any line in this Part III		🗹
1	Briefly describe the o	organization's mission			
SEE S	SCHEDULE O				
2	Did the organization	undertake any significant pro	gram services during the year which w	vere not listed on	
	the prior Form 990 o	or 990-EZ?			☑ Yes ☐ No
	If "Yes," describe the	ese new services on Schedule	0		
3	Did the organization	cease conducting, or make sig	gnificant changes in how it conducts, a	any program	
	services?				🗌 Yes 🗹 No
	If "Yes," describe the	ese changes on Schedule O			
4	Section 501(c)(3) ar		nplishments for each of its three large required to report the amount of gra ervice reported		
4a	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	See Additional Data				
4b	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	See Additional Data				
4c	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	See Additional Data				
	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	MEDIA ACTIVITY AMERI EFFECTIVENESS AND TI ITS MEMBERS THE AGA GROWTH WE ARE SEEII ARE TAKING PLACE THE CUSTOMERS THAT WAN COMPANY ATTORNEYS: REGULATORY AFFAIRS PREPARES TESTIMONY, ADMINISTRATION GROI MANAGEMENT AND INS SERVICE AREA, AGA'S I INCLUDE CALL CENTER	ICAN GAS MAGAZINE PROVIDES N. HAT OF THEIR COMPANIES BY PUB PLAYBOOK SETS FORTH A COMMON OF A COMMON O	S INFORMATIONAL MATERIAL FOR MEMBER ATURAL GAS INDUSTRY PROFESSIONALS WILSHING LEADING EDGE REPORTS ON THE IN SET OF FACTS ABOUT OUR ENERGY USE E COMFORT AND AFFORDABILITY OF NATUF WE CAME AS A COMPORT AND AFFORDABILITY OF NATUF WE CAME AS A COMPORT AND AFFORDABILITY OF NATUF OF THE PROFESSION OF THE FOR A COMPORT AND AS A COMPORT AND A	ITH THE INFORMATION THEY NEED INDUSTRY AND ON AGA ACTIVITIE: AND ITS IMPLICATIONS IT CHRON ALL GAS AND PROVIDES FACT-BASIFRASTRUCTURE TO DELIVER THESE - THE OFFICE OF GENERAL COUNS E COMPANIES OPERATE MORE EFFICH OF COMMISSION AND STATE REGULY FINANCE & ADMINISTRATION - THOUNTING, CUSTOMER SERVICE, HART MORE EFFICIENTLY FOR EXAMENCE OF COURS OF THE RESTORM OF THE MORE OF THE	TO ENHANCE THEIR 5 THAT OFFER VALUE TO ICLES THE CUSTOMER DO CONVERSATIONS THAT BENEFITS TO MORE EL ASSISTS MEMBER CIENTLY FEDERAL ILATORY DEVELOPMENTS, IE FINANCIAL AND MAN RESOURCES, RISK MPLE, IN THE CUSTOMER SUBJECTS COVERED
4d	Other program servi	ces (Describe in Schedule O )			
	(Expenses \$	including (	grants of \$	(Revenue \$	)

Form	990 (2018)			Page <b>3</b>
Par	Checklist of Required Schedules			
		$\square$	Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	لـــــــا	No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 💆	3	Yes	_ !
4	Section 501(c)(3) organizations.  Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?  If "Yes," complete Schedule C, Part II	4		
	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19?  If "Yes," complete Schedule C, Part III	5	Yes	
	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts?  If "Yes," complete Schedule D, Part I	6		No
	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets?  If "Yes," complete Schedule D, Part III 2	8		No
	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏	10		No
	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🕏	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 🥦	11c	_	No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 2	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII 2	12a		No
	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	ı!	No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)	17		No
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
4	Did the annual transfer and the state of COO of annual and the second and the sec			1

column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . . . . . . . .

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

22

Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.  Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?  If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,			
	Part IV	28a		No
	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule $M$	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?  If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
Pa	TV Statements Regarding Other IRS Filings and Tax Compliance			
	Charle of Cahadula O contains a recognize or note to any line in this But I			1 1

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

**b** Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

No

Yes

74

0

1a

1b

Page 4

Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file

7g

7h

8

9a

9h

12a

13a

14a

14b

15

Yes

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No

10a 10b

11a

11b

12b

13b

13c

7с d If "Yes," indicate the number of Forms 8282 filed during the year . . . . 7d | e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .

If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as

If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form

Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during

9a Did the sponsoring organization make any taxable distributions under section 4966? . . .

Sponsoring organizations maintaining donor advised funds.

a Initiation fees and capital contributions included on Part VIII, line 12 . . .

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

**b** Gross income from other sources (Do not net amounts due or paid to other sources 

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

a Is the organization licensed to issue qualified health plans in more than one state?

which the organization is licensed to issue qualified health plans . . . . c Enter the amount of reserves on hand . . . . . . . . . . . . . . .

Enter the amount of reserves the organization is required to maintain by the states in

Section 501(c)(29) qualified nonprofit health insurance issuers.

Section 501(c)(7) organizations. Enter

11 Section 501(c)(12) organizations. Enter

a Gross income from members or shareholders . .

**b** Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Note. See the instructions for additional information the organization must report on Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year? . . . . .

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N . . . . .

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

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Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions  Check if Schedule O contains a response or note to any line in this Part VI	•	onse to	lines
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year a49			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 48			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? •	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7b	Yes	

_	officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
Ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7</b> b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
Ь	Each committee with authority to act on behalf of the governing body?	<b>8</b> b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	e.)	
			Yes	No
102	Did the organization have local chapters, branches, or affiliates?	10a		No
IVa	bla the organization have local enapters, branches, or animates.	10a		NO
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10a		NO
Ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,		Yes	NO
b 11a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the	10b	Yes	IVO
b 11a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	Yes	NO
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990	10b		NO
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	10b 11a 12a	Yes	NO
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in	10b 11a 12a 12b	Yes	NO
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10b 11a 12a 12b	Yes Yes	NO
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?	10b 11a 12a 12b 12c 13	Yes Yes Yes	NO
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent	10b 11a 12a 12b 12c 13	Yes Yes Yes	NO
b 11a b 12a b c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	10b  11a  12a  12b  12c  13  14	Yes Yes Yes Yes Yes Yes	NO
b 11a b 12a b c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official	10b  11a  12a  12b  12c  13  14	Yes Yes Yes Yes Yes Yes	NO

8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following							
а	The governing body?	8a	Yes					
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No				
Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)								
			Yes	No				
	Did the organization have local chapters, branches, or affiliates?	10a		No				
ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes					
13	Did the organization have a written whistleblower policy?	13	Yes					
14	Did the organization have a written document retention and destruction policy?	14	Yes					
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official	15a	Yes					
b	Other officers or key employees of the organization	15b	Yes					
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No				
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation							
	In joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?			1				
	· · · · · · · · · · · · · · · · · · ·	16b						
Se 17	ction C. Disclosure  List the States with which a copy of this Form 990 is required to be filed▶							
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s							
-0	only) available for public inspection. Indicate how you made these available. Check all that apply							
	Own website Another's website 🗹 Upon request 🗌 Other (explain in Schedule O)							
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year							
20	State the name, address, and telephone number of the person who possesses the organization's books and records   JOSEPH L MARTIN CHIEF ACCOUNTING OFFICER 400 NORTH CAPITOL STREET NW NO 450 WASHINGTON, DC 20001	(202)	824-72	55				
		F	orm <b>99</b>	<b>0</b> (201				

101111 330 (2	010)										Page /
Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	nploy	ees	, Highest Comp	ensated Employ	ees,
	Check if Schedule O contains a	response or no	te to an	y line	≘ ın t	hıs	Part VI	١.			🗆
Section	A. Officers, Directors, Tru	ıstees, Key E	mploy	ees	, an	d F	lighe	st (	Compensated En	nployees	
year .	this table for all persons requir of the organization's current of		·						, ,		•
of compensa	tion Enter -0- in columns (D), ( if the organization's <b>current</b> key	E), and (F) if no	compe	nsatı	on w	vas į	paid		- ,,		
• List the who received	organization's five <b>current</b> high direportable compensation (Box and any related organizations	est compensate	d emplo	yees	(oth	ner t	than a	n off	icer, director, truste	e or key employee)	1
• List all o	of the organization's <b>former</b> office compensation from the organization						pensat	ed e	employees who rece	ived more than \$10	0,000
	f the organization's <b>former dir</b> e , more than \$10,000 of reportat										e
compensated	in the following order individual demployees, and former such p	ersons									
☐ Check tl	nis box if neither the organization	n nor any relate	ed organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee	Т
	hours per than one box, unless person compensation compensation week (list is both an officer and a from the any hours director/trustee) organization (W-organization with the compensation organization with the compensation organization organization with the compensation organization organiz		(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and							
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	related organizations
See Additiona	al Data Table										

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Page 8

	<b>(A)</b> Name and Title	(B) Average hours per week (list any hours	Average hours per week (list any hours for related						Repo compo froi organiz	(D) (E) Reportable compensation from the organization (W-2/1099-MISC) (E)			(F) Estimated amount of other compensation from the organization and		
		organizations below dotted line)		Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/109	<i>1</i> 9-№13C)	2/ 2/250	·)	organizati relate organiza	ed	
See /	Additional Data Table		<u> </u>	$\perp$		F	<del>                                     </del>	<del>                                     </del>				$\dashv$			
						$\perp$						$\frac{1}{2}$			
			-	+		<u> </u>	<del>                                     </del>					+			
				$\vdash$	igg	$\vdash$	<del>-</del>	1				$\dashv$			
								$\perp$				$\perp$			
		!	-	_	-	$\vdash$	<u> </u>	<u>  '</u>				+			
c T	Sub-Total	art VII <b>, Section</b>	Α				<b>*</b>	<u>—</u>				0		252 124	
	Total (add lines 1b and 1c)  Total number of individuals (including of reportable compensation from the o	g but not limited	d to thos				re) who	o rec		,963,130 ore than \$1		<u> </u>		852,134	
3	Did the organization list any <b>former</b> of	officer. director	or trust	 tee, k	 (ev e	-mpl	Invee,	or hr	inhest co	mpensater	d emplovee on	_	Yes	No	
4	line 1a? If "Yes," complete Schedule J For any individual listed on line 1a, is	J for such individ	idual .	•	·	•		•	• •			3		No	
	organization and related organizations											4	Yes	·	
5	Did any person listed on line 1a receiv services rendered to the organization		•			,	,		_	ition or ind	ividual for	5		No	
Se 1	ection B. Independent Contract  Complete this table for your five higher from the organization Report comper	nest compensate										mpen	nsation		
	Name :	(A) and business addre	ess							Des	(B) cription of services		(C) Compen		
OYSTE	GROUP LIMITED  TER WHARF 16-18  DON SW11 3RB				_			_			DNAL CONFERENCE		· · · · · ·	,741,590	
UK	BITIONS AND TRADE FAIRS PTY LTD									PROFESSIO	ONAL EXHIBITION		3,	,733,385	
21 SO RYDAI	OUTH STREET NIMERE 2116									ORGANIZER				, , ,	
	CONTRACTING INC									GENERAL C	CONTRACTOR FOR NOVATION		3,	,700,092	
BALTI	OX 37762 IMORE, MD 21297 SING SOLUTIONS INC										ON MGMT FOR WORL	LD	1,	,104,857	
РО ВО	OX 671137 AS, TX 75267			_	_	_		_		GAS CONFE					
CITY S	SECURITY CONSULTANTS  KENDALL STREET NE									SECURITY N CONFERENCE	MGMT FOR WORLD G CE	GAS		676,281	
WASH	HINGTON, DC 20002  Total number of independent contractor		t not lin		+0 th	2056	Listed	- aho	··c) who	received n	than \$100 00	on of			

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

compensation from the organization ▶ 18

						revenue	e: fu	ated or kempt nction venue	Unrela busin reve	ated ness	Revenue excluded from tax under sections 512 - 514
	1a Federated campaign	ıs	1a				re	venue [			512 - 514
nts nts	<b>b</b> Membership dues .	_	1ь								
ora ou	c Fundraising events	<u> </u>	1c								
s, ( An	d Related organization	<u> </u>	1d								
활	e Government grants (co		1								
S, (		· L	1e								
Contributions, Gifts, Grants and Other Similar Amounts	<b>f</b> All other contributions, and similar amounts no above	t included	1f								
휼퇄	g Noncash contribution										
Cont and	in lines 1a - 1f \$			_							
<u>9 P</u>	<b>h Total.</b> Add lines 1a-	11		Business	Code						
<u> </u>	2a MEMBERSHIP DUES					27,0	047,171	27,04	7,171		
Program Service Revenue	b MEETINGS/EXHIBIT				900099	25,5	555,576	25,55	5,576		
8₹	c SPONSORSHIPS				900099	5.7	784,684	5,784	1.684		
Š	d PUBLICATIONS				900099		162,069		5,298	456,7	71
3.					541800		112,319		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	412,3	
an	e SERVICE INCOME				900004					412,3	
ogr	<b>f</b> All other program ser	vice revenue					95,000	9!	5,000		
Ğ	<b>gTotal.</b> Add lines 2a-2f	·	<b>&gt;</b>	59,3	56,819						
	3 Investment income (in	cluding divider	ds, interest			455,72	0				455,720
	similar amounts) 4 Income from investme			oceeds >	<u> </u>	433,72					
	<b>5</b> Royalties				<u> </u>	1,218,15	6				1,218,156
	[	(ı) Real		Personal							
	<b>6a</b> Gross rents				1						
	<b>b</b> Less rental expenses				_						
	c Rental income or (loss)				-						
	<b>d</b> Net rental income or	(loss)		· •	1						
	Г	(ı) Securitie	5 (1	ı) Other							
	<b>7a</b> Gross amount from sales of assets other than inventory	2,087	,342	80							
	<b>b</b> Less cost or other basis and sales expenses	1,607	,469	36,715							
	<b>C</b> Gain or (loss)	479	,873	-36,635	]						
	<b>d</b> Net gain or (loss) .			<b>&gt;</b>	ļ	443,23	8				443,238
Other Revenue	<b>8a</b> Gross income from fu (not including \$ contributions reported See Part IV, line 18	of d on line 1c)									
ev	<b>b</b> Less direct expenses		ь		1						
7	c Net income or (loss) i				J						
Oth	<b>9a</b> Gross income from ga See Part IV, line 19			<u> </u>							
			a		1						
	<b>b</b> Less direct expenses		ь								
	c Net income or (loss) f 10aGross sales of invento			• •	1						
	returns and allowance	es	a								
	<b>b</b> Less cost of goods so	old	ь		]						
	c Net income or (loss) f										
				900009		335,88	3	335,883			
	b		_								
	С										
	d All other revenue .		+		-						
	e Total. Add lines 11a-			. •		225 5 -					
	12 Total revenue. See	Instructions .				335,88					
			- '			61,809,81	6	58,823,612		869,090	2,117,114 Form <b>990</b> (2018)

Forr	m 990 (2018)				Page <b>10</b>
	art IX Statement of Functional Expenses tion 501(c)(3) and 501(c)(4) organizations must complete all co	lumns All other orga	inizations must com	plete column (A)	
	Check if Schedule O contains a response or note to any	line in this Part IX .			<u> 🗆 </u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraisingexpenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	624,400	·		
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	25,000			
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	5,573,930			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	10,557,729			
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	1,002,012			
9	Other employee benefits	1,801,945			
10	Payroll taxes	824,978			
11	Fees for services (non-employees)				
	a Management				
		135,831			
	o Legal	365,806			
	c Accounting				
	il Lobbying	397,968			
•	e Professional fundraising services See Part IV, line 17				
f	Investment management fees	26,218			
ġ	g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	3,119,068			
12	Advertising and promotion	2,220,059			
13	Office expenses	1,382,334			
14	Information technology	783,417			
15	Royalties				
	Occupancy	1,744,595			
	Travel	1,027,346			
	Payments of travel or entertainment expenses for any federal, state, or local public officials	1,027,310			
10	Conferences, conventions, and meetings	22,433,239			
	· · · · · · · · · · · · · · · · · · ·	22,433,233			
	Interest				
	Payments to affiliates				
22	Depreciation, depletion, and amortization	620,076			
23	Insurance	279,167			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O )				
	a UNRELATED BUSINESS INCO	144,140			
	b MEMBERSHIPS & SPONSORSH	630,850			
	c EXCISE TAX ON EXECUTIVE	463,730			
	d SUBSCRIPTIONS	126,815			
	e All other expenses	-211,021			
25	Total functional expenses. Add lines 1 through 24e	56,099,632			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
	Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)				

Forn	n 990	(2018)				Page <b>11</b>
P	art X	Balance Sheet				
		Check if Schedule O contains a response or not	e to ar	y line in this Part IX		🗆
				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			1	
	2	Savings and temporary cash investments .		16,240,038	2	11,841,545
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	639,921
	5 6	Loans and other receivables from current and for trustees, key employees, and highest compensate II of Schedule L	ated er fied pe	rsons (as defined under	5	
ts	7	section 4958(f)(1)), persons described in sectio contributing employers and sponsoring organizations voluntary employees' beneficiary organizations Part II of Schedule L	ations o (see in	of section 501(c)(9) structions) Complete	6 7	
ssets	8	Inventories for sale or use			8	
Ř	9	Prepaid expenses and deferred charges		4.064.894	9	950.042
	-	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	8,141,209		
	Ь	Less accumulated depreciation	10b	1,821,750 2,022,739	10c	6,319,459
	11	Investments—publicly traded securities .		26,649,052	11	24,576,844
	12	Investments—other securities See Part IV, line		12		
	13	Investments—program-related See Part IV, line		13		
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
	16	Total assets.Add lines 1 through 15 (must equ	ial line	34) 49,811,640	16	44,327,811
	17	Accounts payable and accrued expenses		4,613,914	17	4,354,257
	18	Grants payable			18	
	19	Deferred revenue		17,951,571	19	6,632,200
	20	Tax-exempt bond liabilities			20	
S	21	Escrow or custodial account liability Complete F	Part IV	of Schedule D	21	
Liabilities	22	Loans and other payables to current and former key employees, highest compensated employee				
ia:		persons Complete Part II of Schedule L			22	
_	23	Secured mortgages and notes payable to unrela	ted th	rd parties	23	
	24	Unsecured notes and loans payable to unrelated	d third	parties	24	
	25	Other liabilities (including federal income tax, pa and other liabilities not included on lines 17 - 24 Complete Part X of Schedule D		s to related third parties, 14.434,775	25	15,303,410
	26	Total liabilities.Add lines 17 through 25		37,000,260	26	26,289,867
ses		Organizations that follow SFAS 117 (ASC 9 complete lines 27 through 29, and lines 33	58), c and 3	neck here ▶ ☑ and 4.		
lan	27	Unrestricted net assets		12,811,380	27	18,037,944
Ba	28	Temporarily restricted net assets			28	
Fund Balance	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117				
ō	30	check here ► ☐ and complete lines 30 th Capital stock or trust principal, or current funds	rough	34.	30	
ets	31	Paid-in or capital surplus, or land, building or ed		pt fund	31	
Assets or	32	Retained earnings, endowment, accumulated in			32	
	33	- · · · · · · · · · · · · · · · · · · ·	•	12,811,380	33	18,037,944
Net	24	Total liabilities and net assets/fund balances		49.811.640	2/	44 327 811

49,811,640

34

44,327,811 Form **990** (2018)

_	
11	Investments—publicly traded securities .
12	Investments—other securities See Part IV, line 11
13	Investments—program-related See Part IV, line 11
14	Intangible assets
15	Other assets See Part IV, line 11
16	Total assets.Add lines 1 through 15 (must equal line 34)
17	Accounts payable and accrued expenses
18	Grants payable
19	Deferred revenue
20	Tax-exempt bond liabilities
21	Escrow or custodial account liability Complete Part IV of Schedule D
22	Loans and other payables to current and former officers, directors, to key employees, highest compensated employees, and disqualified
	persons Complete Part II of Schedule L
23	Secured mortgages and notes payable to unrelated third parties .
24	Unsecured notes and loans payable to unrelated third parties
25	Other liabilities (including federal income tax, payables to related thi and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D
26	Total liabilities.Add lines 17 through 25
27	Organizations that follow SFAS 117 (ASC 958), check here ▶ complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets
28	Temporarily restricted net assets
29	Permanently restricted net assets
	Organizations that do not follow SFAS 117 (ASC 958),
30	check here ► □ and complete lines 30 through 34. Capital stock or trust principal, or current funds
31	Paid-in or capital surplus, or land, building or equipment fund
32	Retained earnings, endowment, accumulated income, or other funds
33	Total net assets or fund balances
34	Total liabilities and net assets/fund balances

3a

3b

No

Form 990 (2018)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Audit Act and OMB Circular A-133?

### Additional Data

Software ID:

OPERATIONS & ENGINEERING - THE OPERATIONS AND ENGINEERING SECTION INCLUDES 17 TECHNICAL COMMITTEES WHOSE WORK IS OVERSEEN BY A MANAGING

Software Version:

**EIN:** 13-0431590

Name: AMERICAN GAS ASSOCIATION

Form 990 (2018)

#### Form 990, Part III, Line 4a:

COMMITTEE THESE COMMITTEES FOCUS ON HELPING NATURAL GAS UTILITIES ACHIEVE OPERATIONAL EXCELLENCE IN THE SAFE, RELIABLE AND EFFICIENT DELIVERY OF NATURAL GAS THE SIXTEEN TECHNICAL COMMITTEES ARE 1) CONSTRUCTION OPERATIONS, 2) CORROSION CONTROL, 3) CUSTOMER FIELD SERVICES & MEASUREMENT, 4) CYBERSECURITY STRATEGY, 5) DISTRIBUTION INTEGRITY MANAGEMENT, 6) ENGINEERING, 7) ENVIRONMENTAL MATTERS, 8) FIELD OPERATIONS, 9) GAS CONTROL, 10) NATURAL GAS SECURITY, 11) PIPING MATERIALS, 12) QUALITY MANAGEMENT, 13) SAFETY & OCCUPATIONAL HEALTH, 14) SUPPLEMENTAL GAS, 15) TRANSMISSION INTEGRITY MANAGEMENT, 16) TRANSMISSION MEASUREMENT AND 17) UNDERGROUND STORAGE THE OPERATIONS AND ENGINEERING SECTION PROVIDES TIMELY AND RELEVANT INFORMATION TO HELP MEMBER COMPANIES ACHIEVE OPERATIONAL EXCELLENCE IN THE SAFE, RELIABLE, AND EFFICIENT DELIVERY AND USE OF NATURAL GAS. THE 2018 INFORMATION EXCHANGE INCLUDED AGA CONDUCTED 15 PEER REVIEWS OF SAFETY AND OPERATIONAL PRACTICES IN 2018 ALSO, 20 GAS UTILITIES AND TRANSMISSION COMPANIES PARTICIPATED IN A PILOT PEER CYBER REVIEW PROGRAM. THESE EFFORTS OFFER AN EFFECTIVE VENUE FOR MEMBERS TO COMPARE SAFETY AND OPERATIONAL INITIATIVES AND IDENTIFY LEADING PRACTICES AND OPPORTUNITIES TO ENHANCE THEIR PERFORMANCE. THE INSIGHTS GAINED AND INDUSTRY-BASED COLLABORATIONS BUILT ARE HELPING TO ADVANCE SAFE AND RELIABLE NATURAL GAS DELIVERY THROUGHOUT THE UNITED STATES THE AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES RECOGNIZED AGA WITH A 2015 GOLD AWARD DESCRIBING THE PEER REVIEW PROGRAM AS "GROUNDBREAKING" AGA'S BEST PRACTICES PROGRAM IDENTIFIES PROCEDURES OF SUPERIOR PERFORMING GAS INDUSTRY COMPANIES AND INNOVATIVE WORK PRACTICES THAT CAN BE USED TO IMPROVE PARTICIPANTS' OPERATIONS IT FOCUSES ON IMPROVING THE SAFETY AND EFFICIENCY OF GAS DISTRIBUTION SYSTEM CONSTRUCTION, MAINTENANCE, OPERATION, AND INSPECTION TOPICS COVERED IN THE 2018 BEST PRACTICES PROGRAM WERE SYSTEM RELIABILITY, COMPANY PROFILE, RIGHT OF WAY AND PERMITTING, CONTRACTOR OVERSIGHT & QUALITY ASSURANCE AND TRANSMISSION INTEGRITY MANAGEMENT AGA COMPLETED EIGHT PUBLICATIONS ON PIPELINE INSPECTION PRACTICES, SAFETY STATISTICS, PURGING AND EMERGENCY PREPAREDNESS AND JOINED THE NATURAL GAS COUNCIL TO LAUNCH A REPORT ON THE INDUSTRY'S PREPARATION AND ACTIONS AND THE IMPACTS ON CUSTOMERS OF THREE HISTORIC WEATHER EVENTS THAT CONFRONTED THE NATURAL GAS INDUSTRY BETWEEN AUGUST 2017 AND JANUARY 2018 AGA'S SOS PROGRAM ALLOWS INDIVIDUAL MEMBERS TO SEND OPERATIONAL AND TECHNICAL RELATED INQUIRIES TO THEIR PEERS IN MEMBER COMPANIES TO BETTER UNDERSTAND HOW OTHERS ARE ADDRESSING A PARTICULAR ISSUE/CHALLENGE IN 2018, THE PROGRAM FACILITATED 40 MEMBER COMPANY REQUESTS FOR OPERATIONS-RELATED INFORMATION ON SUCH ISSUES AS DAMAGE PREVENTION. PRESSURE AND TEMPERATURE INSTRUMENTS, EMERGENCY RESPONSE TECHNOLOGIES, LONE WORKERS SAFETY PROGRAMS AND MOTOR VEHICLE COLLISION PREVENTION THE AGA OPERATIONS CONFERENCE IS THE NATURAL GAS INDUSTRY'S PREMIER GATHERING OF NATURAL GAS UTILITY AND TRANSMISSION COMPANY OPERATIONS MANAGEMENT FOR THE SHARING OF TECHNICAL KNOWLEDGE, IDEAS, AND PRACTICES TO PROMOTE SAFE, RELIABLE AND COST-EFFECTIVE DELIVERY OF NATURAL GAS TO THE END USER THE OPERATIONS CONFERENCE IS AGA'S LARGEST FORUM WITH REGULARLY 900 OPERATIONS MANAGEMENT PERSONNEL IN ATTENDANCE, INCLUDING OVER 100 SPEAKERS WHO COVER A BROAD RANGE OF TOPICS SUCH AS GAS MEASUREMENT, SAFETY, ENVIRONMENT, STORAGE, ENGINEERING, CONSTRUCTION AND MAINTENANCE, GAS CONTROL, SUPPLEMENTAL GAS, CORROSION CONTROL AND PIPING MATERIALS

#### Form 990, Part III, Line 4b: GOVERNMENT RELATIONS - PROVIDES AGA MEMBERS WITH INFORMATION ON LEGISLATIVE DEVELOPMENTS, PREPARES TESTIMONY, COMMENTS AND FILINGS

PLASTIC PIPE. VOLUNTARY SHARING OF DATA AND TRANSMISSION AND GATHERING LINES

INADVERTENTLY OR OTHERWISE COULD HAVE SERIOUS IMPACTS ON GAS SUPPLY, THE COST OF GAS SERVICE, RELIABILITY AND/OR SAFETY LOW INCOME HOME ENERGY ASSISTANCE PROGRAM (LIHEAP) AGA WORKS TO OBTAIN FUNDING FOR LIHEAP THIS PROGRAM IS ESSENTIAL IN REDUCING THE FINANCIAL BURDEN OF

REGARDING LEGISLATIVE ACTIVITIES, REPRESENTS INTERESTS OF THE INDUSTRY AGA'S GOVERNMENT RELATIONS EFFORTS FOCUS ON PROPOSED LEGISLATION THAT

PARTICIPATED IN OR FILED COMMENTS ON SEVERAL DEPARTMENT OF TRANSPORTATION INITIATIVES AND PROPOSED RULEMAKINGS TO ENHANCE SAFETY ADDRESSING

THOSE ON LOW AND FIXED INCOMES AS THEY PROVIDE THEMSELVES WITH NEEDED BASIC ENERGY SERVICES. AGA FILED COMMENTS AND PROVIDED INPUT TO FEDERAL

REGULATORY AGENCIES RESPONDING TO THE PRESIDENT'S EXECUTIVE ORDER TO STREAMLINE PERMITTING OF PIPELINE INFRASTRUCTURE PROJECTS AGA

# ENERGY MARKETS, ANALYSIS & STANDARDS - IDENTIFIES THE NEED FOR AND CONDUCTS ENERGY ANALYSES AND MODELING EFFORTS IN THE AREAS OF GAS SUPPLY AND DEMAND, ECONOMICS AND THE ENVIRONMENT IT ALSO SUPPORTS THE DEVELOPMENT OF BUILDING ENERGY CODES AND STANDARDS THAT HELP ENHANCE NATURAL GAS SAFETY A LANDMARK STUDY CO-SPONSORED BY THE U.S. DEPARTMENT OF ENERGY, AGA AND 18 MEMBER COMPANIES SUCCESSFULLY RECONCILED THE

DISCREPANCY BETWEEN DIRECT MEASUREMENTS OF EMISSIONS FROM INDUSTRY OPERATIONS AND AFRIAL ASSESSMENTS.

Form 990, Part III, Line 4c:

(A) (D) (B) (C) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated amount of other than one box, unless compensation hours per compensation person is both an officer week (list from the from related compensation

and a director/trustee)

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

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	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
KIMBERLY HARRIS CHAIR	6 00	х		×				0	0	0	
JOSEPH HAMROCK FIRST VICE CHAIR	4 00	х		х				0	0	0	
SCOTT M PROCHAZKA SECOND VICE CHAIR	2 00	х		х				0	0	0	
PIERCE H NORTON II IMMEDIATE PAST CHAIR	2 00	X		x				0	0	0	
KURT ADAMS DIRECTOR	1 00	Х						0	0	0	

PIERCE H NORTON II
IMMEDIATE PAST CHAIR
KURT ADAMS
DIRECTOR

WILLIAM J AKLEY

FRANK ALMARAZ

DAVID H ANDERSON

STEVEN W BAKER

ROBERT F BEARD

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DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the

	any nours	i and	a dir	recto	יז/זר	rustee)	, !	organization	organizations	from the	
	for related organizations below dotted line)		Institutional Trustee	10	key employee	Highest compensated employee	Former	- (W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
LONNIE E BELLAR DIRECTOR	1 00	×						0	0	0	
ADRIAN P CHAPMAN DIRECTOR	1 00	×						0	0	0	
CARL L CHAPMAN DIRECTOR	1 00	×						0	0	0	
DAVID M DALY DIRECTOR	1 00	×						0	0	0	
JOHN S DORAZIO	1 00			$\Box$			$\Box$				

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DIRECTOR
DAVID M DALY
DIRECTOR
JOHN S DORAZIO

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DAVID R EMERY

KEVIN FLETCHER

KIMBERLY GREENE

MICHAEL E HAEFNER

D RUSSELL HARRIS

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless compensation hours per compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

	,	l					' I	(11, 2,4,000			
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
JEFFREY A HARRISON DIRECTOR	1 00	×						0	0	0	
JOHN P HESTER DIRECTOR	1 00	х						0	0	0	
MICHAEL INNOCENZO DIRECTOR	1 00	х						0	0	0	
NICOLE A KIVISTO DIRECTOR	1 00	х						0	0	0	
J BRET LANE	1 00	х						0	0	0	

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DIRECTOR
NICOLE A KIVISTO
DIRECTOR
J BRET LANE

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

JOHN MCAVOY

KENT T LARSON

JAMES P LAURITO

DIANE LEOPOLD

RICHARD J MARK

.......

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other week (list person is both an officer from the from related compensation

	any hours			r/tr	ustee)		organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
MICHAEL P MCMASTERS DIRECTOR	1 00	x					0	0	0	
JERRY NORCIA DIRECTOR	1 00	х					0	0	0	
MORGAN K O'BRIEN DIRECTOR	1 00	х					0	0	0	
PATRICIA KESSLER POPPE DIRECTOR	1 00	х					0	0	0	
DAVID ROBBINS JR	1 00	×					0	0	0	

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PATRICIA KESSLER POPPE
DIRECTOR
DAVID ROBBINS JR
DIRECTOR

IAN ROBERTSON

ROBERT C ROWE

SUZANNE SITHERWOOD

.......

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

JESUS SOTO JR

TJ SZELISTOWSKI

(A) (D) (B) (C) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation amount of other hours per compensation person is both an officer week (list from the from related compensation

	any hours	and	a dır	recto	or/tr	ustee)	)	organization	organizations	from the	
	for related organizations below dotted line)		Institutional Trustee	Officer	key employee	ee voldme Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
RONALD J TANSKI DIRECTOR	1 00	×						0	0	0	
JAMES P TORGERSON DIRECTOR	1 00	×						0	0	0	
ROSS W TURRINI DIRECTOR	1 00	X						0	0	0	
DENNIS P VERMILLION DIRECTOR	1 00	×						0	0	0	

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2,583,299

725,331

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158,081

151,447

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CHARLES S WARRINGTON ...... DIRECTOR

CRAIG E WHITE

ADAM L WRIGHT

FRANKLIN H YOHO

DAVID MCCURDY

PRESIDENT & CEO

CHIEF OPERATING OFFICER

LORI TRAWEEK

..........

DIRECTOR

DIRECTOR

DIRECTOR

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Average Estimated than one box, unless amount of other hours per compensation compensation week (list person is both an officer from the from related compensation

any hours

for related

and Independent Contractors

VP, ENERGY ANALYSIS & STANDARDS

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JASON ROGERS

GEORGE LOWE

VP, GOVT RELATIONS

VP, FEDERAL AFFAIRS

VP, COMMUNICATIONS

JENNIFER O'SHEA

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and a director/trustee)

organization

(W-2/1099-

457,881

445,331

407,743

298,595

organizations

(W- 2/1099-

from the

organization and

40,442

37,412

34,972

30,250

36,566

	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	10	key employee	Highest compensated emptoxies	Former	1 (W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
MICHAEL MURRAY GENERAL COUNSEL	35 00			×				336,881	0	66,990
KEVIN HARDARDT CHIEF FINANCIAL & ADMIN OFFICER	35 00			х				454,726	0	125,378
GARY GARDNER  VP & CORPORATE SECRETARY	35 00			×				367,024	0	103,531
CHRISTINA SAMES VP, OPERATIONS & ENGINEERING	35 00				×			397,643	0	67,065
KENTAL BELEORD	35 00									

KEVIN BELFORD 488,676

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0 SENIOR VP, LAW 35 00 CHRIS MCGILL

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# **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

DLN: 93493316013239

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE C (Form 990 or 990-

EZ)

1 2

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

• Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

Section 527 organizations Complete Part I-A only

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C • Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B

• Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B Do not complete Part II-B If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** AMERICAN GAS ASSOCIATION

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") Political campaign activity expenditures (see instructions) \$ Volunteer hours for political campaign activities (see instructions) Complete if the organization is exempt under section 501(c)(3).

3 Enter the amount of any excise tax incurred by the organization under section 4955 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?

☐ Yes □ No Was a correction made? ☐ Yes If "Yes," describe in Part IV

Complete if the organization is exempt under section 501(c), except section 501(c)(3).

(b) Address

Enter the amount directly expended by the filing organization for section 527 exempt function activities 42,597 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt 70,000 function activities

3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 112,597 Did the filing organization file Form 1120-POL for this year? ✓ Yes

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(c) EIN

(a) Name (d) Amount paid from (e) Amount of political filing organization's contributions received funds If none, enter and promptly and -0directly delivered to a separate political organization If none, enter -0-400 N CAPITOL ST NW 13-0431590 37.155 AMERICAN GAS ASSN POLITICAL ACTION WASHINGTON, DC 20001 COMMITTEE (2) COMMUNITY LEADERS OF AMERICA PO BOX 4977 46-3149989 5,000 GLEN ALLEN, VA 23058 1225 I STREET NW 52-1304889 20,000 DÉMOCRATIC GOVERNORS' ASSOCIATION WASHINGTON, DC 20005 (4) GOPAC 2300 CLARENDON BLVD 52-1237780 10,000 ARLINGTON, VA 22201 1747 PENNSYLVANIA AVE NW 46-4501717 15,000 RÉPUBLICAN ATTORNEYS GENERAL WASHINGTON, DC 20006

Calendar year (or fiscal year (a) 2015 **(b)** 2016 (c) 2017 (d) 2018 (e) Total beginning in) 2a Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 2d, column (e)) Grassroots lobbying expenditures Schedule C (Form 990 or 990-EZ) 2018 d

2a

1

2

3

1

2

b

c Total

3

4

5

Part IV

PART I-A, LINE 1

Part III-A

Part III-B

Current year

Carryover from last year

expenditure next year?

Return Reference

Other activities?

Total Add lines 1c through 1i

501(c)(6).

answered "Yes."

Dues, assessments and similar amounts from members

Supplemental Information

expenses for which the section 527(f) tax was paid).

Taxable amount of lobbying and political expenditures (see instructions)

instructions), and Part II-B, line 1 Also, complete this part for any additional information

Mailings to members, legislators, or the public?

Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes?

If "Yes," enter the amount of any tax incurred under section 4912

Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?

Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?

If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Did the organization agree to carry over lobbying and political expenditures from the prior year?

Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political

If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political

Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues

Were substantially all (90% or more) dues received nondeductible by members?

Did the organization make only in-house lobbying expenditures of \$2,000 or less?

(b)

Amount

Yes

1

2

1

2a

2b

2c

3

4 5

Schedule C (Form 990 or 990EZ) 2018

No

No

No

27,047,171

1,004,980

-301,219

703.761

845,380

-141,619

### For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity Yes During the year, did the filing organization attempt to influence foreign, national, state or local legislation, 1 including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section

and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)

Explanation AGA'S POLITICAL CAMPAIGN ACTIVITIES CONSIST OF CONTRIBUTIONS MADE TO CANDIDATES FOR STATE

AND LOCAL OFFICE WHERE LEGALLY PERMISSIBLE, CONTRIBUTIONS MADE TO OTHER POLITICAL ORGANIZATIONS AND ADMINISTRATIVE EXPENSES FOR ITS SEPARATE SEGREGATED FUND

(a)

No

## **Additional Data**

Software ID:

**Software Version:** 

**EIN:** 13-0431590

Name: AMERICAN GAS ASSOCIATION

Form 990, Schedule C, Part 1-C, Line 5												
(a)Name	( <b>b)</b> Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-								
AMERICAN GAS ASSN POLITICAL ACTION COMMITTEE	400 N CAPITOL ST NW WASHINGTON, DC 20001	130431590		37155								
COMMUNITY LEADERS OF AMERICA	PO BOX 4977 GLEN ALLEN, VA 23058	463149989	5000									
DEMOCRATIC GOVERNORS' ASSOCIATION	1225 I STREET NW WASHINGTON, DC 20005	521304889	20000									
GOPAC	2300 CLARENDON BLVD ARLINGTON, VA 22201	521237780	10000									
REPUBLICAN ATTORNEYS GENERAL ASSOCIATION	1747 PENNSYLVANIA AVE NW WASHINGTON, DC 20006	464501717	15000									
REPUBLICAN GOVERNORS ASSOCIATION	1747 PENNSYLVANIA AVE NW WASHINGTON, DC 20006	521174414	20000									

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

# **Supplemental Financial Statements**

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ▶ Attach to Form 990.

DLN: 93493316013239 OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

(Form 990)

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▶ Go to www.irs.gov/Form990 for the latest information. Inspection Name of the organization **Employer identification number** AMERICAN GAS ASSOCIATION 13-0431590 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🟲 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Par	t III	Organizations Maintaining Co	lections of Art, F	listori	ical Tı	reasu	res, or (	Other	Similar As	ssets (	continued <sub>,</sub>	)
3		the organization's acquisition, accessio (check all that apply)	n, and other records,	check	any of	the fol	lowing tha	at are a	significant i	ise of it	s collection	ו
а		Public exhibition		d		Loan	or exchan	ige prog	ırams			
b		Scholarly research		е		Other						
С		Preservation for future generations										
4	Provid Part >	de a description of the organization's co KIII	llections and explain l	how the	ey furth	ner the	organiza	tion's ex	kempt purpo	se in		
5		g the year, did the organization solicit o s to be sold to raise funds rather than to							ular	□ Y <sub>6</sub>	es 🗆	No
Pa	rt IV	Escrow and Custodial Arrange Complete if the organization answ X, line 21.		m 990	), Part	IV, lır	ne 9, or i	reporte	ed an amou	ınt on	Form 990	), Part
1a		e organization an agent, trustee, custodi ded on Form 990, Part X?	an or other intermed	ary for	contril	butions	or other	assets	not	□ <b>Y</b>	es 🗌	No
b	If "Y∈	es," explain the arrangement in Part XII:	and complete the fo	llowina	table		Г		A	mount		
С		ining balance	'					1c				
d	_	ions during the year						1d				
е		butions during the year						1e				
f		ng balance						1f				
2a												
b	<b>b</b> If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII											
Pa	rt V	Endowment Funds. Complete if	the organization a	nswei	red "Y	es" on	Form 9	90, Par	t IV, line 1	0.		
			(a)Current year	<b>(b)</b> P	rıor yea	r (	(c)Two yea	rs back	(d)Three yea	ars back	(e)Four ye	ears back
<b>1</b> a	Beginn	ing of year balance										
b	Contrib	outions										
С	Net inv	estment earnings, gains, and losses										
d	Grants	or scholarships										
е		expenditures for facilities ograms										
f	Admını	strative expenses										
g	End of	year balance										
2 a		de the estimated percentage of the curred designated or quasi-endowment •	ent year end balance	(line 1	g, colu	mn (a)	) held as					
b	Perm	anent endowment 🟲										
С	Temp	orarily restricted endowment >										
	The p	percentages on lines 2a, 2b, and 2c shou	ıld equal 100%									
3а	organ	nere endowment funds not in the posses nization by	ssion of the organizat	ion tha	t are h	eld and	d administ	ered fo	r the	_	Yes	No
		nrelated organizations			•					-	(i)	
b		elated organizations es" on 3a(ii), are the related organization	ns listed as required o	 on Sche	 edule R	? .	 				a(ii) 3b	<del> </del>
4	Descr	ribe in Part XIII the intended uses of the	organization's endov	vment	funds						•	
Pa	rt VI	Land, Buildings, and Equipme										
	Descri	Complete if the organization answ ption of property  (a) Cost or ot (investment)	her basis (b) Cost						m 990, Pa lepreciation		ne 10. (d) Book va	lue
	Land	<del>  </del>										
	Buildin	gs										
		old improvements			4 79	54,827			282,946			4,471,881
		·	+			3,667			282,940			1,322,127
		nent				32,715			1,257,264			525,451
	Other L Add	ines 1a through 1e (Column (d) must e	aual Form 990 Part	X. colui			0(c) ) .		1,237,264			6,319,459
	··· Auu	mico za dinough ze (columni (u) must e	quai i oiiii 330, Fait i	., colul	···· ( <i>D)</i> ,	, mie 1	-(-//	•	-			ひ,シェラ,サンブ

art VII	<b>Investments—Other Securities.</b> Complete it See Form 990, Part X, line 12.	r tne organiza	tion answ	erea "Yes" on Form 9	90, Part IV, line 11b.
	(a) Description of security or category (including name of security)		<b>(b)</b> Book value		od of valuation of-year market value
-	I derivatives				
)		_			
)					
1					
)					
)					
)					
al. (Columi	n (b) must equal Form 990, Part X, col (B) line 12 )  Investments—Program Related.  Complete if the organization answered 'Yes' o	n Form 990, <b>F</b>	art IV, lır	ne 11c. See Form 990	, Part X, line 13.
	(a) Description of investment		ook value	(c) Meth	od of valuation of-year market value
)					
<b>)</b>					
İ					
)					
)					
١					
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)					
)					
tal. (Columi	n (b) must equal Form 990, Part X, col (B) line 13 )	<b>•</b>	000 P	t IV has did to Con Forms	OOO Bart V loss 15
	Other Assets. Complete if the organization answe (a) Description		III 990, FAI	tiv, mie 11d See Form	(b) Book value
tal. (Colu. Part X	mn (b) must equal Form 990, Part X, col (B) line 15 )  Other Liabilities. Complete if the organization	n answered 'V	es' on Fo		. •
urt X	See Form 990, Part X, line 25.  (a) Description of liability	T dilattered 1			
Federal ı	ncome taxes		(0) 60	ook value	
FERRED C	COMPENSATION			2,918,798	
CRUED PE				5,172,673	
ST RETIRI FERRED R	EMENT HEALTH BENEFITS RENT			2,498,184 3,091,686	
PLIANCE S	STANDARDS/CERTIFICATION LIABILITIES			741,820	
NEFIT RES	STORATION PLAN			880,249	
1		1			
)	n (b) must equal Form 990, Part X, col (B) line 25 )	<b>&gt;</b>			

Part XI

2

5

1

2

c

d

3 4

b

5

Part XIII

See Additional Data Table

Part XII

b

Schedule D (Form 990) 2018

Page 4

-287,516 61,820,313

-10,497

61,809,816

56,294,995

221,581

26,218

56.099.632

Schedule D (Form 990) 2018

56,073,414

_	
С	Recoveries of prior year grants
d	Other (Describe in Part XIII )
e	Add lines 2a through 2d
3	Subtract line <b>2e</b> from line <b>1</b>
4	Amounts included on Form 990, Part VIII, lin

Add lines **4a** and **4b** . . . . .

Donated services and use of facilities . . .

Other (Describe in Part XIII ) . . .

Add lines 2a through 2d .

Return Reference

Subtract line 2e from line 1 .

Supplemental Information

Donated services and use of facilities	•
Recoveries of prior year grants	
Other (Describe in Part XIII )	
Add lines 2a through 2d	
Subtract line <b>2e</b> from line <b>1</b>	
Amounts included on Form 990, Part VIII, line 12, but not on line 1	

Investment expenses not included on Form 990, Part VIII, line 7b .

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

Add lines **4a** and **4b** . . . . . . . . . . .

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) . . . . . . .

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) . . . . . . .

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains (losses) on investments . . . .

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part

2a

2b 2c 2d

4b

2a 2b

2c

2d

4a

4b

Explanation

	1,188,058
2e	
3	
	26,218
	-36,715
4c	

5

2e

3

4c

5

221,581

26,218

-1,475,574

Schedule D (Form 990) 2018	Page <b>5</b>
Part XIII Supplemental Info	mation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2018

### **Additional Data**

Software ID: Software Version:

**EIN:** 13-0431590

Name: AMERICAN GAS ASSOCIATION

# **Supplemental Information**

Return Reference

Explanation PAC CONTRIBUTIONS 196,104 FAS 158 ADJUSTMENT 991,954

**ADJUSTMENTS** 

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	NET LOSS ON ASSET DISPOSAL -36,715

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	PAC EXPENSES 184,866 NET LOSS ON ASSET DISPOSAL 36,715

Sı

efile GRAPHIC print - DO NOT PROCESS			As Filed Data -	-	DLN: 93493316013239		
SCHEDULE F (Form 990)	State	ment of	Activities (	Outside the Uni	ited S	tates	OMB No 1545-0047
		olete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15				.5, or 16.	2018
		C- 1		to Form 990.			
Department of the Treasury	•	Go to www.irs.	gov/rorm990 tor II	nstructions and the latest ii	птогтатіо	n.	Open to Public Inspection
Internal Revenue Service  Name of the organization						Emmlayor idan	tification number
Name of the organization AMERICAN GAS ASSOCIATION	ON					Employer iden	uncation number
						13-0431590	
<b>Part I General Inf</b> Form 990, Pa			outside the U	Jnited States. Comple	te if the	organization a	nswered "Yes" to
1 For grantmakers.	Does the org	ganızatıon ma	ıntaın records to	substantiate the amount	of its gr	ants and	
other assistance, the	grantees' e	eligibility for tl	he grants or assis	stance, and the selection	criteria	used	
to award the grants	or assistanc	:e?					✓ Yes  ☐ No
2 For grantmakers. I outside the United S		Part V the org	anızatıon's proce	dures for monitoring the	use of it	ts grants and oth	ner assistance
<b>3</b> Activites per Region (	The following	g Part I, line 3	table can be duplı	cated if additional space is	needed	)	
(a) Region		<b>(b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in region		program sp	vity listed in (d) is a n service, describe ecific type of ce(s) in region	(f) Total expenditures for and investments in region
See Add'l Data							
_							
<b>3a</b> Sub-total			0 0				12,142
b Total from continuation Part I	sheets to						948,582
c Totals (add lines 3a ai	nd 3b)		0 0				960,724
For Paperwork Reduction Ac	t Notice, see	the Instruction	ns for Form 990.	Cat	No 5008	2W Schedul	le F (Form 990) 2018

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as taxexempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . . . . .

Schedule F (Form 990) 2018							Page <b>3</b>
Part IIII Grants and Otl				<b>ed States.</b> Complete r	f the organization ar	nswered "Yes" to Form S	990, Part IV, line 16.
	duplicated if addit			1	1	ı	
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
						_	

Sche	dule F (Form 990) 2018		Page <b>4</b>
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	<b>☑</b> No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A, don't file with Form 990)		
	Instructions for Forms 3320 and 3320 A, don't me with Form 330)	☐ Yes	<b>☑</b> No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)		
	Corporations (see Instructions for Form 54/1)	$\square$ Yes	<b>✓</b> No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	<b>✓</b> No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
		☐ Yes	<b>✓</b> No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, don't file with Form 990)	□Yes	<b>☑</b> No
	3713, don't me with Form 330)	∟ Yes	<b>™</b> 1/10

Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to any additional information (see instructions).  190 Schedule F, Supplemental Information							
Part V	Provide the amounts of method); a	information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting nd Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide					
90 Sched	lule F, Supp	plemental Information					
Return I	Reference	Explanation					

EXPENDITURES INCLUDED IN PART I ARE DETERMINED USING THE ACCRUAL METHOD

PART I, LINE 3

## **Additional Data**

NORTH AMERICA

## Software ID: Software Version:

**EIN:** 13-0431590

Name: AMERICAN GAS ASSOCIATION

Form 990 Schedule F Part I - Activities Outside The United States										
4 > -										

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EUROPE (INCLUDING ICELAND & GREENLAND)	0	_		ATTEND EUROPEAN CYBERSECURITY BRIEFING	1,529

0 PROGRAM SERVICE

ACTIVITIES

ATTEND CYBER SECURITY

CONFERENCE

893

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) NORTH AMERICA 0 PROGRAM SERVICE MEET WITH CANADIAN 959 **IACTIVITIES** IGAS ASSOCIATION 0 PROGRAM SERVICE ISPEAK AT CANADIAN GAS 988 NORTH AMERICA **IACTIVITIES** IASSOCIATION MEETING

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (f) Total expenditures (e) If activity listed in (d) offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) 0 IPROGRAM SERVICE ATTEND CANADIAN GAS 1.862 NORTH AMERICA **IACTIVITIES** lassociation CYBERSECURITY 1 ICONFERENCE. NORTH AMERICA 0 PROGRAM SERVICE ATTEND CYBER SECURITY 1,609 **IACTIVITIES** CONFERENCE

Form 990 Schedule F Par	t I - Activities	Outside The U	Inited States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
NORTH AMERICA	0		PROGRAM SERVICE ACTIVITIES	ATTEND PUBLIC SAFETY CANADA CONF	3,733
NORTH AMERICA	0		PROGRAM SERVICE ACTIVITIES	SPEAK AT ELECTRIC POWER RESEARCH INSTITUTE MEETING	569

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (f) Total expenditures (e) If activity listed in (d) offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) 0 PROGRAM SERVICE lattending. 1.541 NORTH AMERICA **IACTIVITIES** INTERNATIONAL PIPELINE SECURITY FORUM NORTH AMERICA 0 PROGRAM SERVICE INATURAL RESOURCE 1,190 **ACTIVITIES** INCIDENT COMMAND SYSTEM TRAINING

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) 0 PROGRAM SERVICE 2.168 NORTH AMERICA IATTEND PUBLIC SAFETY **IACTIVITIES** INDUSTRIAL CONTROL ISYSTEMS SYMPOSIUM NORTH AMERICA 0 PROGRAM SERVICE IATTEND ROYAL CANADIAN 851 **ACTIVITIES** MOUNTED POLICE CRITICAL THREAT BRIEF

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) NORTH AMERICA 0 PROGRAM SERVICE ATTEND TWIN EAGLE 971 **IACTIVITIES** NORTH AMERICAN ENERGY CONFERENCE NORTH AMERICA 0 PROGRAM SERVICE ATTEND INTERNATIONAL 2.414 **ACTIVITIES** GAS UNION LNG MEETING

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (f) Total expenditures (e) If activity listed in (d) offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of agents in region services, grants to service(s) in region region recipients located in the region) MIDDLE EAST AND NORTH 0 PROGRAM SERVICE 14.337 IATTEND INTERNATIONAL AFRICA **IACTIVITIES** IGAS UNION WORLD GAS CONFERENCE MEETING EUROPE (INCLUDING ICELAND 0 PROGRAM SERVICE IATTEND INTERNATIONAL 1,882 & GREENLAND) **ACTIVITIES** GAS UNION METHANE **IMEETING** 

Form 990 Schedule F Part	orm 990 Schedule F Part I - Activities Outside The United States										
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region						
EUROPE (INCLUDING ICELAND & GREENLAND)	0		ACTIVITIES	ATTEND INTERNATIONAL GAS UNION COUNCIL MEETING	6,080						
EAST ASIA AND THE PACIFIC	0	· · · · · · · · · · · · · · · · · · ·	ACTIVITIES	ATTEND INTERNATIONAL GAS UNION R&D AND INNOVATION COMMITTEE MEETING	2,562						

Form 990 Schedule F Par	t I - Activities	Outside The U	Inited States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
NORTH AMERICA	0	_	PROGRAM SERVICE ACTIVITIES	SPEAK AT NATURAL GAS TRILATERAL SUMMIT	2,601
EUROPE (INCLUDING ICELAND & GREENLAND)	0	_	ACTIVITIES	ATTEND INTERNATIONAL GAS UNION COUNCIL MEETING	3,225

Form 990 Schedule F Par	orm 990 Schedule F Part I - Activities Outside The United States											
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region							
EUROPE (INCLUDING ICELAND & GREENLAND)	0		ACTIVITIES	ATTEND INTERNATIONAL GAS UNION COMMITTEE MEETING	4,384							
EUROPE (INCLUDING ICELAND & GREENLAND)	0	_	l	SUPPORT IGU WORLD LNG REPORT	25,000							

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region services, grants to service(s) in region region recipients located in the region) EUROPE (INCLUDING ICELAND 0 PROGRAM SERVICE WORLD GAS CONFERENCE 879,376 & GREENLAND) **ACTIVITIES** IROYALTY PAYMENT

DLN: 93493316013239 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization Employer identification number AMERICAN GAS ASSOCIATION 13-0431590 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization (book, FMV, appraisal, noncash assistance or assistance grant cash or government assistance other) (1) See Additional Data (4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018

Schedule I (Form	n 990) 2018						Page <b>2</b>	
	nts and Other Ass t III can be duplicate			als. Complete If the org	anızatıon answered "Yes	" on Form 990, Part IV, line 22	-	
	e of grant or assista		(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance	
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
Part IV	Supplemental I	nformatio	<b>on.</b> Provide the inf	ormation required in	Part I, line 2; Part III	, column (b); and any other a	dditional information.	
Return Refere	nce	Explanation	on					
PART I, LINE 2								

Schedule I (Form 990) 2018

## **Additional Data**

(a) Name and address of

AMERICAN COUNCIL FOR

CAPITAL FORMATION 1001 CONNECTICUT AVENUE NW WASHINGTON, DC 20036

## Software ID: Software Version: EIN: Name:

(b) EIN

52-0991278

**EIN:** 13-0431590

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(6)

Name: AMERICAN GAS ASSOCIATION

(e) Amount of non- (f) Method of valuation

(a) Description of

(h) Purpose of grant

GENERAL SUPPORT

(c) IRC section

organization or government	, ,	if applicable	grant	cash assistance	(book, FMV, appraisal, other)	non-cash assistance	or assistance
ALLIANCE FOR SUSTAINABLE ENERGY LLC 15013 DENVER WEST PARKWAY GOLDEN, CO 80401	26-1939342	501(C)(3)	62,500				GENERAL SUPPORT

15,000

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 52-0805605 501(C)(6) 75.000 IGENERAL SUPPORT AMERICAN PUBLIC GAS ASSOCIATION

CONTRIBUTION

201 MASSACHUSETTS AVENUE
NE
WASHINGTON, DC 20002

15,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

BOY SCOUTS OF AMERICA

9190 ROCKVILLE PIKE BETHESDA, MD 20814

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 52-1266620 501(C)(3) 7.500 BRYCE HARLOW FOUNDATION CONTRIBUTION

1701 PENNSYLVANIA AVE NW WASHINGTON, DC 20006 BUSINESS COUNCIL FOR 52-1801630 501(C)(6) 10,000 GENERAL SUPPORT SUSTAINABLE ENERGY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

805 15TH ST NW WASHINGTON, DC 20005

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 13-5598093 501(C)(3) 100.000 COLUMBIA UNIVERSITY IGENERAL SUPPORT 622 WEST 113TH STREET

GENERAL SUPPORT

25,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

NEW YORK, NY 10025
COMMON GROUND ALLIANCE

2300 WILSON BLVD ARLINGTON, VA 22201

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 46-3149989 527 5.000 IGENERAL SUPPORT COMMUNITY LEADERS OF AMERICA PO BOX 4977

IGENERAL SUPPORT

15.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

GLEN ALLEN, VA 23058

CONGRESSIONAL HISPANIC
CAUCUS INSTITUTE INC

300 M STREET SE WASHINGTON, DC 20003

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 52-1686163 501(C)(3) 6.000 CONTRIBUTION CONGRESSIONAL SPORTSMEN'S FOUNDATION

110 N CAROLINA AVENUE SE WASHINGTON, DC 20003					
CANADIAN STANDARDS ASSOCIATION 8501 EAST PLEASANT VALLEY ROAD	98-0120704	501(C)(6)	15,000		GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

INDEPENDENCE, OH 44131

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance 52-1304889 527 20.000 DEMOCRATIC GOVERNORS' IGENERAL SUPPORT ASSOCIATION 1225 I STREET NW

WASHINGTON, DC 20004

WASHINGTON, DC 20005 EDISON ELECTRIC INSTITUTE 13-0659550 501(C)(6) 10.000 IGENERAL SUPPORT 701 PENNSYLVANIA AVE NW

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance ENERGY SOLUTIONS CENTER 54-1825542 501(C)(6) 14 800 GENERAL SUPPORT

METHANE SYMPOSIUM

400 NORTH CAPITOL STREET NW WASHINGTON, DC 20001	34 1023342	301(0)(0)	14,000		SENERAL SOFF ORT
GLADSTEIN NEANDROSS &	95-4749713	FOR-PROFIT	12.500		SUPPORT RETHINK

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ASSOCIATES

2525 OCEAN PARK BLVD SANTA MONICA, CA 90405

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance GOPAC 52-1237780 527 10.000 IGENERAL SUPPORT GENERAL SUPPORT

2300 CLAREDON BLVD ARLINGTON, VA 22201 INTERNATIONAL CODE 36-3999004 501(C)(6) 29.000 COUNCIL 4051 W FLOSSMOOR ROAD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

COUNTRY CLUB HILLS, IL

60478

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 53-0204609 501(C)(4) 10.800 NATIONAL ASSOCIATION OF IGENERAL SUPPORT REGULATORY UTILITY COMMISSIONERS 1101 VERMONT AVE NW WASHINGTON, DC 20005 5,000 NATIONAL ASSOCIATION OF 59-1986067 501(C)(4) IGENERAL SUPPORT STATE UTILITY CONSUMER ADVOCATES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

8380 COLESVILLE ROAD SILVER SPRING, MD 20910

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance NATIONAL CONFERENCE OF 84-0772595 501(C)(3) 20,000 IGENERAL SUPPORT

STATE LEGISLATURES 7700 E FIRST PLACE DENVER, CO 80230					
NATIONAL ENERGY AND UTILITY AFFORDABILITY COALITION	52-1559709	501(C)(3)	10,000		GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

4250 NORTH FAIRFAX DR ARLINGTON, VA 22203

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance NATURAL GAS VEHICLES FOR 52-1588725 501(C)(6) 15.000 IGENERAL SUPPORT AMERICA 400 N CAPITOL ST NW WASHINGTON, DC 20001

IGENERAL SUPPORT

20.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(6)

PACIFIC NORTHWEST

ECONOMIC REGION 2200 ALASKAN WAY SEATTLE, WA 98121

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance REPUBLICAN ATTORNEYS 46-4501717 527 15.000 IGENERAL SUPPORT GENERAL ASSOCIATION 1747 PENNSYLVANIA AVE NW WASHINGTON, DC 20006 REPUBLICAN GOVERNORS 52-1174414 527 20.000 IGENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ASSOCIATION

1747 PENNSYLVANIA AVE NW WASHINGTON, DC 20006

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 52-1469926 501(C)(3) 14.800 THE ECONOMIC CLUB OF IGENERAL SUPPORT WASHINGTON DC 1156 15TH STREET NW

WASHINGTON, DC 20005

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ATLANTA, GA 30342

THE WATERFALL FOUNDATION 58-2442068 501(C)(3) 13.000 I CONTRIBUTION PO BOX 422223

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 54-0883744 501(C)(3) 6.000 US ASSOCIATION OF FORMER CONTRIBUTION MEMBERS OF CONGRESS

1401 K STREET NW WASHINGTON, DC 20005 US CHAMBER OF COMMERCE 53-0045720 501(C)(6) 10.000 IGENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1615 H STREET NW

WASHINGTON, DC 20062

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 13-2923701 501(C)(3) 7.500 IGENERAL SUPPORT WASHINGTON AREA FUEL FUND (SALVATION ARMY)

IGENERAL SUPPORT

10.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

115

615 SLATERS LANE	
ALEXANDRIA, VA 22314	
WESTERN GOVERNORS'	
ASSOCIATION	

1800 BROADWAY DENVER, CO 80202

efil	e GRAPHIC pr	int - DO NOT PROCESS	As Filed Data	a -	DLN: 934	9331	6013	239
Schedule J		Co	ompensati	ion Information	OM	IB No	1545-0	0047
(Fori	n 990)	For certain Office		rustees, Key Employees, and Hig ated Employees	hest	20	1 (	<u> </u>
		► Complete if the org	ganization answ	ered "Yes" on Form 990, Part IV	, line 23.	<b>Z</b> U	18	5
Depar	tment of the Treasury	► Go to <u>www.irs.go</u>		to Form 990. instructions and the latest inform	mation.	pen i	o Pul	olic
	nl Revenue Service me of the organiza	ation			Employer identificat		ectio	
	RICAN GAS ASSOCI					ion ne	illibei	
Pa	rt I Questi	ons Regarding Compensa	ntion		13-0431590			
	Questi.	ons regulating compensa					Yes	No
1a				the following to or for a person liste y relevant information regarding the				
		or charter travel		Housing allowance or residence for	personal use			
	_	companions	님	Payments for business use of perso				
		nification and gross-up payment	is L	Health or social club dues or initiati				
	☐ Discretion	nary spending account		Personal services (e g , maid, chau	rreur, cher)			
Ь		xes in line 1a are checked, did t all of the expenses described ab		ollow a written policy regarding payn iplete Part III to explain	nent or reimbursement	1b	Yes	
2				or allowing expenses incurred by all r, regarding the items checked in line	. 1.2	2	Yes	
	directors, truste	es, officers, including the CEO/1	Executive Director	r, regarding the items checked in line	: Ia·			
3	organization's C	EO/Executive Director Check a	II that apply Don	ed to establish the compensation of t not check any boxes for methods CEO/Executive Director, but explain				
	✓ Compens	ation committee	✓	Written employment contract				
		ent compensation consultant	✓	Compensation survey or study				
		of other organizations	<b>▽</b>	Approval by the board or compensa	ition committee			
4	During the year related organiza		990, Part VII, Se	ction A, line 1a, with respect to the f	iling organization or a			
а	_	ance payment or change-of-con	itrol navment?			4a		No
b		r receive payment from, a supp		ified retirement plan?		4b	Yes	
С	•	r receive payment from, an equ	•	· ·		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons an	d provide the app	olicable amounts for each item in Par	t III			
	Only 501(c)(3	), 501(c)(4), and 501(c)(29	) organizations	must complete lines 5-9.				
5	For persons liste		on A, line 1a, did t	the organization pay or accrue any				
а	The organization	1 <sup>?</sup>				5a		
b	Any related orga					5b		
	-	5a or 5b, describe in Part III						
6		ed on Form 990, Part VII, Section ontingent on the net earnings o		the organization pay or accrue any				
а	The organization					6a		
b	Any related orga					<b>6</b> b		
-	•	6a or 6b, describe in Part III		Miles announced and the second	ı			
7		ed on Form 990, Part VII, Section escribed in lines 5 and 6? If "Ye		the organization provide any nonfixe rt III	a	7		
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," d	escribe	8		
9	If "Yes" on line 5 53 4958-6(c)?	8, did the organization also follo	ow the rebuttable	presumption procedure described in	Regulations section	9		
For F	Paperwork Redu	iction Act Notice, see the Ins	structions for Fo	orm 990. Cat No. 5	50053T Schedule J	(Form	990)	2018

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. ch individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII  Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual							
(A) Name and Title	(B) Breat	(B) Breakdown of W-2 and/or 1099-MISC compensation			( <b>D)</b> Nontaxable benefits	(E) Total of columns	<b>(F)</b> Compensation in
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
See Additional Data Table							
					'		
					1		
	+			+			
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					<u>'</u>	<del>                                     </del>	
					<u>'</u>	<del> </del>	
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					1		

Part III Supplemental Information					
Provide the information, explanation, or	descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information				
Return Reference	Explanation				
	FIRST CLASS TRAVEL- THE CHAIR OF THE BOARD OF DIRECTORS AND SPOUSE ARE AUTHORIZED FOR FIRST CLASS TRAVEL THE CHAIR OF THE AMERICAN GAS ASSOCIATION SERVES ON A VOLUNTARY BASIS AND CONTRIBUTES A SIGNIFICANT AMOUNT OF TIME TRAVELING IN CARRYING OUT THOSE DUTIES IT IS THEREFORE APPROPRIATE DURING THE CHAIR'S TENURE THAT THE ASSOCIATION REIMBURSE THE CHAIR AND OR THE CHAIR'S COMPANY FOR EXPENSE				

Page 3

THEREFORE APPROPRIATE DURING THE CHAIR'S TENURE THAT THE ASSOCIATION REIMBURSE THE CHAIR AND OR THE CHAIR'S COMPANY FOR EXPENSE
INCURRED IN THE CONDUCT OF THE CHAIR'S DUTIES AND IN ACCORDANCE WITH AGA'S TRAVEL POLICY THE PRESIDENT & CEO IS ELIGIBLE FOR BUSINESS
CLASS TRAVEL EXPENSES ON FLIGHTS SCHEDULED FOR MORE THAN 2-1/2 HOURS IF BUSINESS CLASS TRAVEL IS NOT OFFERED FOR A SPECIFIC FLIGHT, FIRST
CLASS TRAVEL EXPENSES MAY BE REIMBURSED TRAVEL FOR COMPANIONS- THE ASSOCIATION RECOGNIZES THAT THERE WILL BE OCCASIONS WHEN IT IS
APPROPRIATE FOR THE CHAIR'S OR THE PRESIDENT AND CEO'S SPOUSE TO TRAVEL ON BEHALF OF THE ASSOCIATION IN THESE CASES APPROVAL FOR THE
TRAVEL MUST BE RECEIVED IN ADVANCE AGA CONSIDERS EXPENSES OF A TRAVELING SPOUSE TO BE TAXABLE INCOME TO THE EMPLOYEE EXPENSES ARE

IADDED TO THE EMPLOYEE'S W-2 WAGES IN ACCORDANCE WITH THE LAW AND APPROPRIATE TAXES ARE WITHHELD

Schedule J (Form 990) 2018

Return Reference	Explanation
·	457(F) PLAN DAVID MCCURDY, CONTRIBUTIONS OF \$87,500 LORI TRAWEEK, CONTRIBUTIONS OF \$100,000 KEVIN HARDARDT, CONTRIBUTIONS OF \$65,000 GARY GARDNER, CONTRIBUTIONS OF \$50,000 CHRISTINA SAMES, CONTRIBUTIONS OF \$65,000 JENNIFER O'SHEA, CONTRIBUTIONS OF \$25,000

#### **Additional Data**

Additional Batt	•							
			Software ID:					
			Software Version:					
			EIN:	13-0431590				
			Name:	AMERICAN GAS ASS	OCIATION			
F 000 Calcal Ia	_	D- 1 TT - 0(C D:						
	J,		of W. 2 and/or 1000 MISS				(E) Total of columns	(E) Companyation in
(A) Name and Title		(i) Base Compensation	of W-2 and/or 1099-MIS(  (ii)  Bonus & Incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	( <b>D</b> ) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
DAVID MCCURDY PRESIDENT & CEO	(1)	1,486,694	1,050,000	46,605	117,750	46,746	2,747,795	0
1112313 E111 & GEG	(11)	0	0	0	0	0	0	0
LORI TRAWEEK CHIEF OPERATING OFFICER	(1)	435,669	200,000	89,662	133,000	28,111	886,442	0
CHIEF OF ENVIRONMENT OF FIGURE	(11)	0	0	0	0	0	0	0
MICHAEL MURRAY GENERAL COUNSEL	(1)	278,529	50,000	8,352	35,750	35,005	407,636	0
	(11)	0	0	0	0	0	0	0
KEVIN HARDARDT CHIEF FINANCIAL & ADMIN	(1)	280,244	120,000	54,482	98,000	37,043	589,769	0
OFFICER	(11)	0	0	0	0	0	0	0
GARY GARDNER VP & CORPORATE	(1)	267,640	75,000	24,384	83,000	25,096	475,120	0

15,794

3,600

24,400

153,945

13,493

3,161

35,750

37,010

33,000

33,513

30,250

30,250

33,775

7,524

7,217

3,766

2,805

9,121

467,168

533,210

498,098

482,610

440,798

337,966

SECRETARY

CHRISTINA SAMES VP, OPERATIONS & ENGINEERING

KEVIN BELFORD

SENIOR VP, LAW

CHRIS MCGILL

VP, ENERGY ANALYSIS & STANDARDS

JASON ROGERS VP, GOVT RELATIONS

GEORGE LOWE VP, FEDERAL AFFAIRS

VP, COMMUNICATIONS

JENNIFER O'SHEA

(11)

(1)

(1)

(1)

(1)

(1)

(1)

286,849

292,576

358,481

201,386

304,250

225,434

95,000

192,500

75,000

90,000

90,000

70,000

efile GRAPHIC	print - DO NOT PROCESS		DLN:	93493316013239
SCHEDULE (Form 990 or 990 EZ)	Complete to provide information for Form 990 or 990-EZ or to prov		ns on	OMB No 1545-0047  2018  Open to Public Inspection
Namel ชิะthยเอกัgania AMERICAN GAS ASSOC 990 Schedule O			Employer identii 13-0431590	fication number
Return Reference		Explanation		
FORM 990, PART III, LINE 1, ORGANIZATION MISSION	APPROVED BY THE AGA BOARD OF DIRECTORS AGA) REPRESENTS COMPANIES DELIVERING NA LY RESPONSIBLE WAY TO HELP IMPROVE THE Q S MISSION IS TO PROVIDE CLEAR VALUE TO ITS ING VOICE AND FACILITATOR ON ITS BEHALF IN IVERY OF NATURAL GAS TO HOMES AND BUSINES PROGRAMS AND DEVELOPS STANDARDS TO HUMERS, 2 ADVOCATES FOR NATURAL GAS INDU DELS THAT ARE PRIORITIES FOR THE INDUSTRY RAL GAS BY EMPHASIZING BEFORE A VARIETY OF TURAL GAS AS PART OF THE SOLUTION TO THE ITATES THE EXCHANGE OF INFORMATION AND IF ACHIEVE OPERATIONAL EXCELLENCE, 5 HELPS CUSTOMERS, REGULATORY TRENDS, NATURAL IES, 6 COLLECTS, ANALYZES AND DISSEMINATE AND CONSUMERS ABOUT THE BENEFITS PROVIE, 7 ENCOURAGES THE DEVELOPMENT, COMMERAS END-USE TECHNOLOGIES, AND 8 DELIVERS IN	TURAL GAS SAFELY, RELIABLY UALITY OF LIFE FOR THEIR CUMEMBERSHIP AND SERVE AS TOPROMOTING THE SAFE, RELIABLY SSES ACROSS THE NATION COMELY INTERPRETATION OF STAKEHOLDERS THE BENEF AND ENVIROMEMBERS MANAGE AND RESPERS OR CAPITAL MARKET ISSUS INFORMATION TO OPINION LIDED BY ENERGY UTILITIES AND ECIALIZATION, AND REGULATOR	AND IN AN ENV STOMERS EVER THE INDISPENSA BLE, AND EFFICI ORE STRENGTH VERY OF NATUR CONSTRUCTS AN IE EFFICIENT US TITS OF CLEAN, A DOMMENTAL GOA ICE METRICS TO POND TO THE EN JES AND EMERG EADERS, POLICE OTHE NATURAL RY ACCEPTANCE	VIRONMENTAL RY DAY AGA' ABLE, LEAD ENT DEL IS 1 CONDUCT RAL GAS TO CONS ND BUSINESS MO SE OF NATU ABUNDANT NA NLS, 4 FACIL D HELP MEMBERS JERGY NEEDS OF SING TECHNOLOG Y MAKERS GAS INDUSTRY

Return Reference	Explanation
FORM 990, PART III, LINE 2	AGA HOSTED THE WORLD GAS CONFERENCE, WHICH WAS HELD JUNE 25-29, 2018 IN WASHINGTON, DC TH E WORLD GAS CONFERENCE IS THE WORLD'S LARGEST AND MOST IMPORTANT GAS INDUSTRY EVENT WHERE THE FOREMOST POLICY MAKERS, BUSINESS LEADERS AND TECHNICAL EXPERTS GATHER EVERY THREE YEAR S TO SHAPE THE GLOBAL ENERGY AGENDA IN 2018, MORE THAN 14,000 PEOPLE FROM 90 COUNTRIES AT TENDED THE MOST SUCCESSFUL WORLD GAS CONFERENCE IN ITS 87 HISTORY THEY TOURED THE EXTENSI VE EXHIBITION HALLS AND ENGAGED IN HIGH-LEVEL INDUSTRY DISCUSSIONS ON TOPICS SUCH AS NATUR AL GAS TRADE, TECHNOLOGY AND INNOVATION, AND PROVIDING AFFORDABLE AND RELIABLE SERVICES TO RESIDENTIAL AND COMMERCIAL NATURAL GAS CUSTOMERS THE 2018 WORLD GAS CONFERENCE RAISED TH E VISIBILITY OF NATURAL GAS ON A GLOBAL SCALE AND TRANSFORMED WHAT HAD BEEN PRIMARILY A TE CHNICAL CONFERENCE INTO AN INTERNATIONAL DISCUSSION ABOUT PATHWAYS FOR NATURAL GAS AS A FO UNDATION FUEL FOR PROSPERITY IN THE UNITED STATES AND THROUGHOUT THE WORLD THERE WAS STRO NG ATTENDANCE FROM KEY POLICY MAKERS AND THOUGHT LEADERS THREE US CABINET SECRETARIES, FIVE US SENATORS, MORE THAN 20 MEMBERS OF CONGRESS, FOUR FERC COMMISSIONERS, SIX NARUC COMMISSIONERS AND NUMEROUS OTHER SENIOR ADMIRATION OFFICIALS ADDITIONALLY, 330 MEDIA REPRESENTATIVES ATTENDED, WHICH DROVE MORE THAN 300 PIECES OF UNIQUE MEDIA COVERAGE AND 120 MILLION MEDIA IMPRESSIONS HELD IN CONJUNCTION WITH THE WORLD GAS CONFERENCE, AGA'S YOUNG PROFESSIONAL PROGRAM WAS ALSO A GREAT SUCCESS, WITH 120 PARTICIPANTS ATTENDING THE EVENT TO HEAR FROM TOP INDUSTRY LEADERS ON THEIR EXPERIENCES AND EXPERTISE WITHIN THE GLOBAL GAS IND USTRY

Return Explanation Reference

FORM 990. THE ASSOCIATION'S BYLAWS. UNDER ARTICLE VII. SECTION 2. PROVIDES THAT THE BOARD OF DIRECTO PART VI. RS MAY APPOINT AN EXECUTIVE COMMITTEE. THE EXECUTIVE COMMITTEE IS ELECTED BY THE ENTIRE BO I ARD AND MAY EXERCISE CERTAIN POWERS OF THE BOARD DURING THE INTERVALS BETWEEN MEETINGS OF THE BOARD THE EXECUTIVE COMMITTEE IS GENERALLY COMPRISED OF THE BOARD OFFICERS AND NOT LE SS THAN 7 OTHER MEMBERS OF THE BOARD, AGA BOARD MEMBERS ARE EXECUTIVES OF AGA FULL MEMBERS.

SECTION A. LINE 1

Return Explanation
Reference

FORM 990,	THE ASSOCIATION HAS FIVE CLASSES OF MEMBERS UNDER ARTICLE III OF ITS BYLAWS FULL MEMBERS
PART VI,	INCLUDE UNITED STATES GAS DISTRIBUTION PUBLIC AND MUNICIPAL UTILITIES AND HAVE VOTING RIGH
SECTION A,	TS LIMITED MEMBERS, ASSOCIATES, INTERNATIONAL MEMBERS AND INTERNATIONAL AFFILIATES CAN PA
LINE 6	RTICIPATE ON CERTAIN COMMITTEES, TAKE ADVANTAGE OF EDUCATIONAL OPPORTUNITIES AND PARTICIPA
	TE IN OTHER APPLICABLE ACTIVITIES

Return Explanation
Reference

FORM 990, THE ASSOCIATION IS A MEMBERSHIP ORGANIZATION AND FULL MEMBERS NOMINATE AND ELECT MEMBERS O PART VI, F THE BOARD OF DIRECTORS (THE ASSOCIATION'S PRINCIPAL GOVERNING BODY) AT THE ASSOCIATION'S SECTION A, ANNUAL MEETING
LINE 7A

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	THE MEMBERS OF THE ASSOCIATION MAKE CERTAIN DECISIONS, SUCH AS, THE ELECTION OF THE PRINCI PAL GOVERNING BODY (BOARD OF DIRECTORS) AS OUTLINED IN THE ORGANIZATION'S BYLAWS AT THE AN NUAL OR SPECIAL MEETINGS OF THE ASSOCIATION SPECIAL MEETINGS MAY BE CALLED BY THE MEMBERS HIP TO ADDRESS ANY ISSUES OR QUESTIONS THE ASSOCIATION'S GOVERNING BODIES ARE ACTIVE IN A NUMBER OF WAYS THE ASSOCIATION MEMBERS ELECT A BOARD OF DIRECTORS (BOD) FROM THE MEMBERS HIP COMMITTEES RELATED TO FINANCIAL OVERSIGHT, COMPENSATION AND GOVERNANCE ARE ESTABLISHE D BY THE BOD THESE INCLUDE THE EXECUTIVE COMMITTEE, BOARD FINANCE COMMITTEE, BOARD AUDIT COMMITTEE AND BOARD COMPENSATION COMMITTEE (BOD CHAIR, VICE CHAIR, 2ND VICE CHAIR, AND OTH ER BOD MEMBERS USUALLY WITH LEADERSHIP ROLES IN THE ASSOCIATION) THE AUDIT COMMITTEE CHAIR IS A MEMBER OF THE BOARD OF DIRECTORS AND PROVIDES REGULAR REPORTS OF THE AUDIT COMMITTEE.

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE ASSOCIATION'S INTERNAL PROCESS FOR REVIEW OF TAX FORMS IS EXTENSIVE DUE TO THE COMPLE XITY OF THE RETURN, THE ASSOCIATION HAS HIRED ITS OUTSIDE ACCOUNTING FIRM TO PREPARE THE F ORM 990 THE ASSOCIATION'S CONTROLLER ACCUMULATES THE DATA AND FORWARDS TO THE OUTSIDE ACC OUNTING FIRM WHO DRAFTS THE FORM 990 A DRAFT OF THE FORM 990 IS THEN REVIEWED BY THE STAF F REVIEW GROUP (SRG) WHICH IS COMPRISED OF THE ASSOCIATION'S CHIEF OPERATING OFFICER, CHIE F FINANCIAL OFFICER, CONTROLLER, THE GENERAL COUNSEL AND OTHERS THE CONTROLLER ACCUMULATE S ALL COMMENTS AND FORWARDS TO THE OUTSIDE ACCOUNTING FIRM TO BE INCORPORATED IN THE FINAL DRAFT OF THE FORM 990 THE FINAL DRAFT IS PROVIDED TO THE AUDIT COMMITTEE THE CONTROLLER REVIEWS THE 990 WITH THE AUDIT COMMITTEE THE AUDIT COMMITTEE CHAIR REPORTS ON THIS REVIE W TO THE BOARD OF DIRECTORS THE 990 IS PROVIDED TO THE BOARD OF DIRECTORS BEFORE IT IS FILED

Return

Reference	
FORM 990, PART VI, SECTION B, LINE 12C	THE ORGANIZATION HAS NEW EMPLOYEES REVIEW AND SIGN A STATEMENT OF COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY AT THE TIME OF HIRING ALL EMPLOYEES AND BOARD MEMBERS HAVE A CONTINUING DUTY TO REPORT ANY ACTUAL OR POTENTIAL CONFLICT OF INTEREST IN ACCORDANCE WITH THE POLICY AND ANNUALLY SIGN A STATEMENT OF COMPLIANCE NEW BOARD MEMBERS (NBM'S) ATTEND A BOARD ORIENTATION SESSION WITH THE ORGANIZATION'S CHAIRMAN, PRESIDENT, CHIEF FINANCIAL OFFICE R, GENERAL COUNSEL AND OTHERS WHERE THE ASSOCIATION'S POLICIES ARE REVIEWED NBM'S MAKE A DECLARATION OF ANY POTENTIAL CONFLICT OF INTEREST ALL BOARD MEMBERS HAVE A CONTINUING DUT Y TO REPORT ANY ACTUAL OR POTENTIAL CONFLICT THE POTENTIAL CONFLICTS FOR BOARD MEMBERS, O FFICERS, EMPLOYEES AND OTHERS ARE REVIEWED BY THE ASSOCIATION'S CEO, GENERAL COUNSEL, CFO AND HUMAN RESOURCES MANAGING DIRECTOR AND A SCHEDULE IS PREPARED AND FURNISHED TO THE INDE PENDENT AUDITORS AND MADE AVAILABLE TO THE AGA AUDIT COMMITTEE

Explanation

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	CEO THE CEO'S COMPENSATION IS FIRST DISCUSSED BY THE BOARD COMPENSATION COMMITTEE WITH AN INDEPENDENT CONSULTING FIRM SPECIALIZING IN NON-PROFIT ORGANIZATIONS TO DETERMINE THE BOA RD COMPENSATION COMMITTEE'S RECOMMENDATION TO THE BOARD OF DIRECTORS THE CHAIRMAN OF THE BOARD THEN PRESENTS THE RECOMMENDATIONS AND REASONS FOR THE CEO COMPENSATION ADJUSTMENT, I F ANY THE CEO'S COMPENSATION IS THEN APPROVED BY VOTE OF THE FULL BOARD CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATIONS, DECISIONS, AND BOARD OF DIRECTORS ACTION IS MAINTAINE D IN THE HUMAN RESOURCE FILES AND MINUTES OF THE COMPENSATION COMMITTEE AND BOARD OF DIRECTORS MEETINGS OTHER OFFICERS OR KEY EMPLOYEES THE ASSOCIATION UTILIZES A MULTIFACETED AP PROACH TO DETERMINE COMPENSATION NOT ONLY FOR ITS CEO, BUT FOR ITS OFFICERS AND EMPLOYEES THIS INCLUDES ESTABLISHING WRITTEN POSITION DESCRIPTIONS, SALARY RANGES FOR POSITIONS, SE TTING POSITION GOALS, PROVIDING WRITTEN PERFORMANCE EVALUATIONS, MEASUREMENT OF PERFORMANC E, QUARTERLY, SEMI-ANNUAL OR ANNUAL GOAL REVIEW, AND CONTEMPORANEOUS SUBSTANTIATIONS OF THE PROCESS THE ASSOCIATION'S CURRENT COMPENSATION POLICY DATED NOVEMBER 30, 2011 DESCRIBES THE PROCESS IN MORE DETAIL THE ASSOCIATION ALSO RETAINS AN INDEPENDENT COMPENSATION CONS ULTING FIRM TO ADVISE THE BOARD COMPENSATION COMMITTEE AND OFFICERS COMPENSATION ADJUSTME NTS USUALLY ARE RECOMMENDED BY SUPERVISORS AND APPROVED BY MANAGERS, DIRECTORS AND/OR OFFICERS ADJUSTMENTS MUST ALSO BE APPROVED BY THE MANAGING DIRECTOR, HUMAN RESOURCES OFFICER AND VICE PRESIDENT INDIVIDUAL SALARY ADJUSTMENTS ARE RECOMMENDED TO THE BOARD COMPENSATION NO COMMITTEE AFTER REVIEW AND THEN REPORTED TO THE BOARD OF DIRECTORS

Return

	Reference	
SECTION C. UN AGA ORG) UNDER "ABOUT US " THE CONFLICT OF INTEREST STATEMENT IS ALSO AVAILABLE UNDER "A BOUT US " FINANCIAL STATEMENTS ARE PROVIDED TO THE ENTIRE BOARD AND OTHERS ON A QUARTERLY BASIS ANNUAL AUDITED FINANCIAL STATEMENTS ARE PROVIDED TO THE ENTIRE MEMBERSHIP FINANCIA	PART VI, SECTION C,	OVERNING DOCUMENTS, OFFICERS, BOARD MEMBERS AND MEMBERS ARE AVAILABLE ON AGA'S WEBSITE (WW W AGA ORG) UNDER "ABOUT US " THE CONFLICT OF INTEREST STATEMENT IS ALSO AVAILABLE UNDER "A BOUT US " FINANCIAL STATEMENTS ARE PROVIDED TO THE ENTIRE BOARD AND OTHERS ON A QUARTERLY BASIS ANNUAL AUDITED FINANCIAL STATEMENTS ARE PROVIDED TO THE ENTIRE MEMBERSHIP FINANCIAL, GOVERNANCE AND OTHER INFORMATION CAN ALSO BE OBTAINED FROM THE ASSOCIATION ELECTRONICAL

Explanation

990 Schedule O, Supplemental Information Return Explanation Reference FORM 990. FAS 158 ADJUSTMENT 991.954 PART XI, LINE 9

Return Explanation
Reference

LINE 2C

FORM 990, THE AUDIT OVERSIGHT PROCESS HAS REMAINED UNCHANGED FROM THE PRIOR YEAR PART XII,

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE R** (Form 990)

Department of the Treasury

Internal Revenue Service

# **Related Organizations and Unrelated Partnerships**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2018

DLN: 93493316013239 OMB No 1545-0047

> Open to Public Inspection

Name, address, and EIN (if applicable) of disregarded entity    Co												
Part I Identification of Disregarded Entities Complete if	the organ	ızatıon answ	ered "Yes	" on Form	990, Part	IV, line 3		431390				
(a)  Name, address, and EIN (ıf applicable) of disregarded entity		(b) Primary ad	ctivity	Legal don	nicile (state	(d) Total inc	come	(e) End-of-year	r assets	Direct co	ontrolling	
related tax-exempt organizations during the tax year.									because			
(a) Name, address, and EIN of related organization	Primai	( <b>b)</b> ry activity	Legal dom	ıcıle (state	Exempt Code	section	Public ch	arıty status	Dir	ect controlling	Section (13) co ent	n 512(b ontrolled tity?
(1)AMERICAN GAS ASSN PAC C00007450 400 NORTH CAPITOL STREET NW			C	C	527						_	No
WASHINGTON, DC 20001												
For Paperwork Reduction Act Notice, see the Instructions for Form	990.		Ca	t No 501	35Y				Sch	edule R (Form	990) 2	018

(a) Name, address, and EIN of related organization		<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related unrelated, excluded from tax under sections 512- 514)	total income		( <b>I</b> Disprop alloca		(i) Code V-UBI amount in bo 20 of Schedule K-1 (Form 1065)	Gene mana part	j) ral or aging ner?	(k) Percen owner
					314)			Yes	No		Yes	No	
					1		1		1			1 1	
Identification of Related Organi because it had one or more related	zations Taxable as a ( organizations treated as	Corporation s a corporation	or Trus	<b>t</b> Complete st during th	ıf the organ ie tax year.	ızatıon ansv	wered "Yes	" on Fo	orm 9!	90, Part IV	, lıne	34	
Identification of Related Organi because it had one or more related  (a)  Name, address, and EIN of related organization	zations Taxable as a (organizations treated as	L do (state	on or tru: (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e)	vered "Yes  (f) Share of total income	Share	(g) of end- year assets	of- Perce	h)	Se (1	(1) ection 5 13) cont entity
because it had one or more related  (a)  Name, address, and EIN of	organizations treated as	L do (state	on or tru: (c) egal micile	st during th	(d) controlling Tyentity	(e) pe of entity corp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of- Perce	h) intage	Se (1	ection 5 L3) cont
because it had one or more related  (a)  Name, address, and EIN of	organizations treated as	L do (state	on or tru: (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e) pe of entity corp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of- Perce	h) intage	Se (1	ection 5 13) cont entity
because it had one or more related  (a)  Name, address, and EIN of	organizations treated as	L do (state	on or tru: (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e) pe of entity corp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of- Perce	h) intage	Se (1	ection 5 13) cont entity
because it had one or more related  (a)  Name, address, and EIN of	organizations treated as	L do (state	on or tru: (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e) pe of entity corp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of- Perce	h) intage	Se (1	ection 5 13) cont entity
because it had one or more related  (a)  Name, address, and EIN of	organizations treated as	L do (state	on or tru: (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e) pe of entity corp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of- Perce	h) intage	Se (1	ection 5 13) cont entity
because it had one or more related  (a)  Name, address, and EIN of	organizations treated as	L do (state	on or tru: (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e) pe of entity corp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of- Perce	h) intage	Se (1	ection 5 13) cont entity

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a	1	No
<b>b</b> Gift, grant, or capital contribution to related organization(s)	1b	•	No
c Gift, grant, or capital contribution from related organization(s)	. 10	:	No
d Loans or loan guarantees to or for related organization(s)	1d	ı	No
e Loans or loan guarantees by related organization(s)	1e	:	No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	<b>1</b> g	,	No
h Purchase of assets from related organization(s)	1h	1	No
i Exchange of assets with related organization(s)	<b>1</b> i		No
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)	<u>1j</u>		No
k Lease of facilities, equipment, or other assets from related organization(s)	1 k	<u> </u>	No
l Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m Performance of services or membership or fundraising solicitations by related organization(s)	1n	n	No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1r	1 Yes	
o Sharing of paid employees with related organization(s)	10	•	No
p Reimbursement paid to related organization(s) for expenses	<b>1</b> p	,	No

k	Lease of facilities, equipment, or other assets from related organization(s)	1k		No
ı	Performance of services or membership or fundraising solicitations for related organization(s)	11		No
n	Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
0	Sharing of paid employees with related organization(s)	10		No
р	Reimbursement paid to related organization(s) for expenses	<b>1</b> p		No
q	Reimbursement paid by related organization(s) for expenses	<b>1</b> q		No
r	Other transfer of cash or property to related organization(s)	1r	Yes	<del>                                     </del>
5	Other transfer of cash or property from related organization(s)	1s		No
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds			

(a) Name of related organization (b) Transaction type (a-s) (c) Amount involved (d) Method of determining amount involved Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	section 501(c)(3) organizations?		t Are all partners section 501(c)(3) organizations?		Are all partners section 501(c)(3) organizations?		total end-of-	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	box managing partner? lle		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No					
													_				
													_				
	Schedule R (Form 990) 2018												0) 2018				

